

SUPERVISOR'S STATEMENT

In Connection With Disability Retirement Under the Civil Service Retirement System

Section A - Applicant Iden	tificat	ion								
1. Name (last, first, middle)					2. Date of birth (mo., day, yr.)			Social security number		
Section B - Information Ab	out E	mplo	vee's Perform	an	ce (See Super	visor's Guide	lines on	back)		
Title of current position (attach a copy of position description and current performance standards and, if available, latest performance evaluation)					Job series, grade a		3. Date	of entry into current position , day, yr.)		
Is employee unable to perform or is performance less than fully successful with regard tooany critical element of current position?					4	omplete items B5 o to Section C	- B7			
Approximate date unnacceptable performance or inability to perform began (mo., yr.)	Has employee received, after the date in item increase or an award based on performance of the control of							within-grade increase ted under 5 CFR 531.409(d)?		
	Yes—— Dates of performance				nwhich increase or a	award was based	Yes No			
Identify critical element(s) of the position which endocumentation such as notice to employee that produce the produce of	mployee do erformance	es not perf is less thar	orm successfully or at all. If p fully successful or physician	erfo s rec	rmance is nottfully succes commendation regarding n	ssful, explain how. Atta nedical restrictions.	ch supporting	3		
Section C - Information Ab	out E	mplo	yee's Attenda	nc	e (See Superv	risor's Guidelii	nes on l	back)		
Has employee's attendance stopped for apparent medical reasons?					1a. How long is absence expected to continue (if known)?					
Is employee's attendance unacceptable continuing in current position?		Complete items C3 - C5 Go to Section D			Approximate date attendance stopped or become unacceptable (mo., yr.)					
How many hours of leave has employer (Attach an explanation of why you approved leave your decision to approve leave, leave records, remuch information as possible about specific reason.)	and copies cords of cor	of medical ntact with o	information on which you bas	sed		ENTER LEAVE HOURS USED		ual Sick LWOP		
Section D - Information Ab	out E	mplo	yee's Conduct	: (3	See Supervisor	's Guidelines	on back	()		
1. Is employee's conduct unsatisfactory? Yes — Complete ite No — Go to Section					11 11					
Describe how conduct is unsatisfactor	y (attach	support	ting documentation, suc	ch a	as notices to employ	ee of proposed ac	lverse acti	ons).		
Section E - Accommodation	n and	Reas	ssignment (See	e S	Supervisor's Gu	idelines on ba	ack)			
What efforts have been made to accordance	mmodate	the emp	oloyee in current position	n?						
Has employee been reassigned to a ne permanent position?		No —	Complete item E3	C	Has employee been or other temporary p	osition?	ight duty"	Yes — Complete item E4 No — Go to Section F		
Describe the reason for temporary nat				ticip	pated to occupy the p	oosition.				
Section F - Supervisor's C										
1. How long have you supervised the employee? (yr., mo.)					I. Supervisor's office	e mailing address				
I certify that all statements made on this Supervisor's Statement are true to the best of my knowledge and belief.										
2a. Supervisor's signature	2	c. Date								
2b. Supervisor's name (typed)					2e. Supervisor's telephone number (including area code)					

SUPERVISOR'S GUIDELINES

GENERAL INFORMATION

Disability retirement determinations are made in accordance with civil service disability retirement regulations. A finding of entitlement to disability retirement benefits is made only when the information submitted with the application shows that an employee is unable to perform useful and efficient service because of disease or injury (1) in the employee's current position or (2) with position, in the same agency and commuting area at the same grade or pay level and tenure, for which the employee is qualified for reassignment. Useful and efficient service means fully successful performance of the critical or essential elements of the position (or the ability to perform at that level) and satisfactory conduct and attendance.

The disability retirement application must contain documentation that specifically demonstrates:

- A deficiency in service with respect to performance, attendance or conduct, or, in the absence of any actual service deficiency, a showing that the medical condition is incompatible with either useful service or retention in the position.
- 2. A medical condition, which is defined as a disease or injury.
- A relationship between the service deficiency and the medical condition such that the medical condition has caused the service deficiency.
- The duration of the medical condition, both past and expected, and a showing that the condition, in all probability, will continue to be disabling for at least one year.
- The applicant's inability to perform useful and efficient service arose while the employee was serving under the Civil Service Retirement System.
- The inability of the employing agency to make reasonable accommodation to the employee's medical condition.
- The absence of another available position, within the employing agency and commuting area at the same grade or pay level and tenure, to which the employee is qualified for assignment.

The law requires that where an employee who otherwise would be eligible for disability retirement initiates an application, the agency must review all vacant positions under its jurisdiction at the same grade or pay level and tenure and in the same commuting area to determine if the employee meets the minimum qualification standards. The purpose of this law is to encourage the retention of disabled employees in positions for which they are qualified to continue productive employment.

INSTRUCTIONS

The employee identified on the other side has indicated that he or she intends to apply for disability retirement. The applicant's signature on the "Applicant's Statement" authorizes you to provide the information and documentation requested. You are asked to provide information about the applicant's job, performance, attendance, and conduct.

If you need more space in any section, attach a separate sheet and indicate that an attachment is provided.

The following definitions apply to the terms used in the Supervisor's Statement:

- "Less than fully successful performance" means performance of an employee which fails to meet established performance standards in one or more critical elements of the employee's position or the equivalent level for a position not under Part 430 of OPM's regulations.
- "Critical element" means a component of an employee's job that is of sufficient importance that performing below the minimum standard established by management requires remedial action, such as denial of within-grade increase, and may be the basis for reducing the grade level or removing the employee.
- "Unacceptable attendance" means absence from work which is too frequent, unpredictable, or lengthy to allow the job to be done.
- "Unsatisfactory conduct" means conduct for which an employee may be removed or disciplined for cause under adverse action procedures. (For example, discourteous conduct to the public, behavior which disrupts the workplace, or behavior which poses a threat to the life, health, safety, or well-being of co-workers, subordinates, or the public.)
- "Accommodation" means an adjustment made to a job and/or work environment that enables a qualified handicapped person to perform the duties of that position. Reasonable accommodation may include modifying the worksite, adjusting the work schedule, restructuring the job, acquiring or modifying equipment or devices, providing interpreters, readers or personal assistants, and reassigning or retraining employees.
- 5 CFR 531.409(d) provides for a waiver of the requirements for determination of an employee's level of competence in certain cases where the employee was in duty status for less than 60 days during the 52 calendar weeks before a within-grade increase would be due. See FPM Chapter 531, Subchapter 4.

After completing and certifying this form and attaching the appropriate documentation, return the original to the employee or to your personnel office according to instructions and practices in your agency. In either case, A COPY MUST BE GIVEN TO THE EMPLOYEE. Please DO NOT send the form directly to OPM unless OPM specifically requests you to do so in this case.

All sections of the form must be completed properly. Failure to do so will delay the processing of the disability application at **OPM**. If necessary, you may be contacted by OPM for additional information or clarification.